

## INTERN CONTACT FORM

## SUMMER RESIDENCE

Name:							
Permanent Address:							
City:			State:		Zip:		
Home Phone:			Cell Phone:				
Email:							
(Address during the school year, if different than above)							
School Address:							
City:			State:		Zip:		
Phone:			At this address through: / /				
SCHOOL INFORMATION							
3							
Cumulative GPA (MUST BE 2.50+): Expected Graduation Date:							
Sophomore	Sophomore		Senior Graduate Student				
AREAS OF INTEREST (Indicate 3, in order of preference)							
Finance ( )	Environment ( )	Traf	-	Turnpik ()	es Con	struction ( )	
Transportation Systems,	Highway	High	nway	Material	ls & Asso	et Management &	
Management &	Maintenance	Desi	•	Research	h Perf	ormance	
Operations ( )	( )	(	)	( )	Stra	tegies ( )	
INTERNSHIP AVAILABILITY							
Available to start on: / / Available through: / /							
Part-Time (29.5 hours per week) <b>OR</b>							
(If part-time, note below the hours you are available. Each shift must be at least 4 hours long.)							
Monday	Tuesday	W	ednesda	у L	Thursday	Friday	
to	to	to			to	to	